

2009 “Try And Dive” Registration

We are again offering a one week try and dive opportunity for families who would like to give diving a go but are not sure the sport is for them. This one week trial, from May 26 – June 7, would allow prospective divers to participate in team practice sessions and spirit activities before making a full commitment to the team for the 2009 season.

Please fill in the information below and bring along to the sign up evenings at FV Elementary School or, return the completed form along with a check payable to: **Flower Valley Dive Team.**

Mail to: **Jane Isaac 4521 Valley Forge Drive Rockville, MD 20853**

2007 Dive Team Reps: Jane Isaac 301-570 8827; the_isaacs@comcast.net

AND Donna Snyder 301-929 9075; snyder4613@verizon.net

Family Name: _____	Home Phone # _____
Father’s Name: _____	Work Phone # _____
Mother’s Name: _____	Work Phone # _____
Address: _____	
E-Mail Address: _____	

Diver’s Name	Boy/ Girl	Date of Birth	Age as of 6/01/09	Diver Fee
1.				\$ 10
2.				\$ 10
3.				\$ 10
TOTAL				

A dive team member must be able to swim the width of the pool without touching pool bottom.

Emergency Contact/ Name 1	Phone #: _____
Address: _____	Relationship: _____
Emergency Contact/ Name 2	Phone# _____
Address: _____	Phone# _____
Child’s Physician : _____	Phone # _____

Liability Waiver: As the parent (or Guardian) of the above mentioned minor(s), I grant permission for this minor to participate in any and all official activities of the Flower Valley Dive Team for the 2009 Summer Season. I assume all risks and hazards incidental to such participation, including transportation to and from such activities; and hereby release and waive any and all claims against the organizers, sponsors, supervisors, other participants and persons transporting this minor(s). In case of emergency, I give permission for my child to receive emergency medical treatment at the nearest hospital.

X _____
Signature of Parent or Guardian

Date